

## WAKEFERN / SHOPRITE PRICE PLUS CLUB PARTICIPATION FORM

BUYER'S NAME: V. VanvourellisMETHOD OF PAYMENT: (CHECK ONE)\*  
( ) INVOICE DEDUCTION (X) CHECKDEPARTMENT NAME & NUMBER:  
\_\_\_\_\_BILL TO: R. J. Reynolds Tobacco Co.VENDOR NAME: R. J. Reynolds Tobacco Co.NAME: G. N. Kuruc, Jr.A/P VENDOR NUMBER: 075088ADDRESS: 400 Raritan Center ParkwayREPRESENTATIVE NAME:  
G. N. Kuruc, Jr.

Edison, NJ 08837

PHONE: 908-225-4774

ITEM CODE	UPC	PRODUCT DESCRIPTION/SIZE	DISCOUNT OFFERED	CYCLE DATES	4WK SALE RETAIL	GROSS PROFIT
8000703	12300-12012	Salem King	\$2.00	4/21 - 5/11		
8000648	12300-12212	Salem 100's	"			
8000664	12300-12412	Salem Light King	"			
8000656	12300-12512	Salem Light 100's	"			
8000795	12300-17206	Salem Custom Case	"			
8000630	12300-12612	Salem Slim Light 100's	"			
8000606	12300-12806	Salem Ultra King	"			
8000680	12300-12912	Salem Ultra 100's	"			

I agree to reimburse Wakefern Food Corporation/ShopRite the dollar value of all PRICE PLUS CLUB Shopper Discounts plus an additional \$.08 per item promotional charge.

Form #43-678 (3) 6/91

Date: 1/16/91Sales Rep Signature: G. N. Kuruc\* Payment to be received  
15 days from invoice date

## WAKEFERN / SHOPRITE PRICE PLUS CLUB PARTICIPATION FORM

BUYER'S NAME: V. VanvourellisMETHOD OF PAYMENT: (CHECK ONE)\*  
 INVOICE DEDUCTION  CHECK

DEPARTMENT NAME &amp; NUMBER:

BILL TO: R. J. Reynolds Tobacco Co.VENDOR NAME: R. J. Reynolds Tobacco Co.NAME: G. N. Kuruc, Jr.A/P VENDOR NUMBER: 075088ADDRESS: 400 Raritan Center Parkway

REPRESENTATIVE NAME:

Edison, NJ 08837

G. N. Kuruc, Jr.PHONE: 908-225-4774

ITEM CODE	UPC	PRODUCT DESCRIPTION/SIZE	DISCOUNT OFFERED	CYCLE DATES	4WK SALE RETAIL	GROSS PROFIT
8010106	12300-25513	Doral Ultra King	\$2.00	2/18 - 3/16		
8010156	12300-15113	Doral Light King	"			
8010198	12300-16613	Doral Full Flavor King	"			
8010211	12300-16813	Doral Light Menthol 100's	"			
8010229	12300-15213	Doral Light 100's	"			
8010237	12300-16713	Doral Ultra 100's	"			
8010245	12300-15313	Doral Full Flavor 100's	"			
8011754	12300-15713	Doral Light Menthol King	"			
8010384	12300-84013	Doral Full Flavor Box	"			
8010392	12300-84113	Doral Light Box	"			

I agree to reimburse Wakefern Food Corporation/ShopRite the dollar value of all PRICE PLUS CLUB Shopper Discounts plus an additional \$.08 per item promotional charge.

Form #43-678 (3) 6/91

Date: 1/16/96Sales Rep Signature: G. N. Kuruc\* Payment to be received  
15 days from invoice date

## WAKEFERN / SHOPRITE PRICE PLUS CLUB PARTICIPATION FORM

BUYER'S NAME: V. VanvourellisMETHOD OF PAYMENT: (CHECK ONE)\*  
( ) INVOICE DEDUCTION (X) CHECKDEPARTMENT NAME & NUMBER:  
\_\_\_\_\_BILL TO: R. J. Reynolds Tobacco Co.VENDOR NAME: R. J. Reynolds Tobacco Co.NAME: G. N. Kuruc, Jr.A/P VENDOR NUMBER: 075088ADDRESS: 400 Raritan Center ParkwayREPRESENTATIVE NAME:  
G. N. Kuruc, Jr.Edison, NJ 08837  
PHONE: 908-225-4774

ITEM CODE	UPC	PRODUCT DESCRIPTION/SIZE	DISCOUNT OFFERED	CYCLE DATES	4WK SALE RETAIL	GROSS PROFIT
800151	12300-71113	Winston Select Light King	\$2.00	2/18 - 3/16		
800119	12300-71213	Winston Select Light Box King	"			
800200	12300-71013	Winston SElect Full Flavor Box	"			
800038	12300-20166	Winston Select Slim Light 100's	"			
800046	12300-20277	Winston Select Light 100's	"			
800012	12300-70913	Winston Select Full Flavor King	"			
800428	12300-11013	Winston King	"			
8000452	12300-11213	Winston Box	"			
8000460	12300-11113	Winston Light King	" "			
8000486	12300-11313	Winston Light 100's	"			
8000517	12300-11413	Winston 100's	"			

I agree to reimburse Wakefern Food Corporation/ShopRite the dollar value of all PRICE PLUS CLUB Shopper Discounts plus an additional \$.08 per item promotional charge.

Form #43-678 (3), 6/91

Date: 1/14/96Sales Rep Signature: G. N. Kuruc\* Payment to be received  
15 days from invoice date

WAKEFERN / SHOPRITE PRICE PLUS CLUB PARTICIPATION FORM



BUYER'S NAME: V. Vanvourellis

METHOD OF PAYMENT: (CHECK ONE)\*  
( ) INVOICE DEDUCTION (x) CHECK

**DEPARTMENT NAME & NUMBER:**

BILL TO: R. J. Reynolds Tobacco Co.

VENDOR NAME: R. J. Reynolds Tobacco Co

NAME: G. N. Kuruc, Jr.

A/P VENDOR NUMBER: 075088

**ADDRESS:** 400 Raritan Center Parkway

**REPRESENTATIVE NAME:**

Edison, NJ 08837

G. N. Kuruc, Jr.

PHONE: 908-225-4774

I agree to reimburse Wakefern Food Corporation/ShopRite the dollar value of all PRICE PLUS CLUB Shopper Discounts plus an additional \$.08 per item promotional charge. Form #43-67

Form #43-678 (3) 6/91

Date: 1/11/01

Sales Rep Signature: John Krasl

\* Payment to be received  
15 days from invoice date

## WAKEFERN / SHOPRITE PRICE PLUS CLUB PARTICIPATION FORM

BUYER'S NAME: V. VanvourellisMETHOD OF PAYMENT: (CHECK ONE)\*  
( ) INVOICE DEDUCTION (  ) CHECK

DEPARTMENT NAME &amp; NUMBER:

BILL TO: R. J. Reynolds Tobacco Co.VENDOR NAME: R. J. Reynolds Tobacco Co.NAME: G. N. Kuruc, Jr.A/P VENDOR NUMBER: 075088ADDRESS: 400 Raritan Center ParkwayREPRESENTATIVE NAME:  
G. N. Kuruc, Jr.

Edison, NJ 08837

PHONE: 908-225-4774

ITEM CODE	UPC	PRODUCT DESCRIPTION/SIZE	DISCOUNT OFFERED	CYCLE DATES	4WK SALE RETAIL	GROSS PROFIT
8010106	12300-25513	Doral Ultra King	\$2.00	2/18 - 3/16		
8010156	12300-15113	Doral Light King	"			
8010198	12300-16613	Doral Full Flavor King	"			
8010211	12300-16813	Doral Light Menthol 100's	"			
8010229	12300-15213	Doral Light 100's	"			
8010237	12300-16713	Doral Ultra 100's	"			
8010245	12300-15313	Doral Full Flavor 100's	"			
8011754	12300-15713	Doral Light Menthol King	"			
8010384	12300-84013	Doral Full Flavor Box	"			
8010392	12300-84113	Doral Light Box	"			

I agree to reimburse Wakefern Food Corporation/ShopRite the dollar value of all PRICE PLUS CLUB Shopper Discounts plus an additional \$.08 per item promotional charge.

Form #43-678 (3) 6/91

Date: 1/16/96Sales Rep Signature: G. N. Kuruc\* Payment to be received  
15 days from invoice date

## WAKEFERN / SHOPRITE PRICE PLUS CLUB PARTICIPATION FORM

BUYER'S NAME: V. VanvourellisMETHOD OF PAYMENT: (CHECK ONE)\*  
( ) INVOICE DEDUCTION (x) CHECK

DEPARTMENT NAME &amp; NUMBER:

BILL TO: R. J. Reynolds Tobacco Co.VENDOR NAME: R. J. Reynolds Tobacco Co.NAME: G. N. Kuruc, Jr.A/P VENDOR NUMBER: 075088ADDRESS: 400 Raritan Center Parkway

REPRESENTATIVE NAME:

Edison, NJ 08837

G. N. Kuruc, Jr.PHONE: 908-225-4774

ITEM CODE	UPC	PRODUCT DESCRIPTION/SIZE	DISCOUNT OFFERED	CYCLE DATES	4WK SALE RETAIL	GROSS PROFIT
8030017	12300-97513	Worth Full Flavor King	\$2.00	3/17 - 4/20		
8030106	12300-97713	Worth Light King	"			
8030198	12300-97913	Worth Light Menthol King	"			
8031097	12300-97813	Worth Light 100's	"			
8031186	12300-97613	Worth Full Flavor 100's	"			
8031275	12300-92813	Worth Ultra 100's	"			
8031364	12300-98013	Worth Light Menthol 100's	"			

I agree to reimburse Wakefern Food Corporation/ShopRite the dollar value of all PRICE PLUS CLUB Shopper Discounts plus an additional \$.08 per item promotional charge.

Form #43-678 (3) 6/91

Date: 1/11/96Sales Rep Signature: G. N. Kuruc\* Payment to be received  
15 days from invoice date

## WAKEFERN / SHOPRITE PRICE PLUS CLUB PARTICIPATION FORM

BUYER'S NAME: V. VanvourellisMETHOD OF PAYMENT: (CHECK ONE)\*  
( ) INVOICE DEDUCTION (X) CHECK

DEPARTMENT NAME &amp; NUMBER:

BILL TO: R. J. Reynolds Tobacco Co.VENDOR NAME: R. J. Reynolds Tobacco Co.NAME: G. N. Kuruc, Jr.A/P VENDOR NUMBER: 075088ADDRESS: 400 Raritan Center Parkway

REPRESENTATIVE NAME:

Edison, NJ 08837

C. N. Kuruc, Jr.PHONE: 908-225-4774

ITEM CODE	UPC	PRODUCT DESCRIPTION/SIZE	DISCOUNT OFFERED	CYCLE DATES	4WK SALE RETAIL	GROSS PROFIT
8000703	12300-12012	Salem King	\$2.00	4/21 - 5/11		
8000648	12300-12212	Salem 100's	"			
8000664	12300-12412	Salem Light King	"			
8000656	12300-12512	Salem Light 100's	"			
8000795	12300-17206	Salem Custom Case	"			
8000630	12300-12612	Salem Slim Light 100's	"			
8000606	12300-12806	Salem Ultra King	"			
8000680	12300-12912	Salem Ultra 100's	"			

I agree to reimburse Wakefern Food Corporation/ShopRite the dollar value of all PRICE PLUS CLUB Shopper Discounts plus an additional \$.08 per item promotional charge.

Form #43-678 (3) 6/91

Date: 1/16/91Sales Rep Signature: G. N. Kuruc\* Payment to be received  
15 days from invoice date

## WAKEFERN / SHOPRITE PRICE PLUS CLUB PARTICIPATION FORM

BUYER'S NAME: V. VanvourellisMETHOD OF PAYMENT: (CHECK ONE)\*  
( ) INVOICE DEDUCTION (  ) CHECK

DEPARTMENT NAME &amp; NUMBER:

BILL TO: R. J. Reynolds Tobacco Co.VENDOR NAME: R. J. Reynolds Tobacco Co.NAME: G. N. Kuruc, Jr.A/P VENDOR NUMBER: 075088ADDRESS: 400 Raritan Center ParkwayREPRESENTATIVE NAME:  
G. N. Kuruc, Jr.EDISON, NJ 08837  
PHONE: 908-225-4774

ITEM CODE	UPC	PRODUCT DESCRIPTION/SIZE	DISCOUNT OFFERED	CYCLE DATES	4WK SALE RETAIL	GROSS PROFIT
8010106	12300-25513	Doral Ultra King	\$2.00	4/21 - 5/11		
8010156	12300-15113	Doral Light King	"			
8010198	12300-16613	Doral Full Flavor King	"			
8010211	12300-16813	Doral Light Menthol 100's	"			
8010229	12300-15213	Doral Light 100's	"			
8010237	12300-16713	Doral Ultra 100's	"			
8010245	12300-15313	Doral Full Flavor 100's	"			
8011754	12300-15713	Doral Light Menthol King	"			
8010384	12300-84013	Doral Full Flavor Box	"			
8010392	12300-84113	Doral Light Box	"			

I agree to reimburse Wakefern Food Corporation/ShopRite the dollar value of all PRICE PLUS CLUB Shopper Discounts plus an additional \$.08 per item promotional charge.

Form #43-678 (3) 6/91

Date: 1/16/92Sales Rep Signature: G. N. Kuruc\* Payment to be received  
15 days from invoice date

## WAKEFERN / SHOPRITE PRICE PLUS CLUB PARTICIPATION FORM

BUYER'S NAME: V. VanvourellisMETHOD OF PAYMENT: (CHECK ONE)\*  
( ) INVOICE DEDUCTION (X) CHECK

DEPARTMENT NAME &amp; NUMBER:

BILL TO: R. J. Reynolds Tobacco Co.VENDOR NAME: R. J. Reynolds Tobacco Co.NAME: G. N. Kuruc, Jr.A/P VENDOR NUMBER: 075088ADDRESS: 400 Raritan Center ParkwayREPRESENTATIVE NAME:  
G. N. Kuruc, Jr.Edison, NJ 08837  
PHONE: 908-225-4774

ITEM CODE	UPC	PRODUCT DESCRIPTION/SIZE	DISCOUNT OFFERED	CYCLE DATES	4WK SALE RETAIL	GROSS PROFIT
800151	12300-71113	Winston Select Light King	\$2.00	2/18 - 3/16		
800119	12300-71213	Winston Select Light Box King	"			
800200	12300-71013	Winston SElect Full Flavor Box	"			
800038	12300-20166	Winston Select Slim Light 100's	"			
800046	12300-20277	Winston Select Light 100's	"			
800012	12300-70913	Winston Select Full Flavor King	"			
800428	12300-11013	Winston King	"			
8000452	12300-11213	Winston Box	"			
8000460	12300-11113	Winston Light King	": "			
8000486	12300-11313	Winston Light 100's	"			
8000517	12300-11413	Winston 100's	"			

I agree to reimburse Wakefern Food Corporation/ShopRite the dollar value of all PRICE PLUS CLUB Shopper Discounts plus an additional \$.08 per item promotional charge.

Form #43-678 (3), 6/91

Date: 1/11/96Sales Rep Signature: G. N. Kuruc\* Payment to be received  
15 days from invoice date

WAKEFERN / SHOPRITE PRICE PLUS CLUB PARTICIPATION FORM



BUYER'S NAME: V. Vanvourellis

DEPARTMENT NAME & NUMBER:

VENDOR NAME: R. J. Reynolds Tobacco Co

A/P VENDOR NUMBER: 075088

**REPRESENTATIVE NAME:**  
G. N. Kuruc, Jr.

METHOD OF PAYMENT: (CHECK ONE)\*  
( ) INVOICE DEDUCTION (x) CHECK

BILL TO: R. J. Reynolds Tobacco Co.

NAME: G. N. Kuruc, Jr.

ADDRESS: 400 Raritan Center Parkway

Edison, NJ 08837

**PHONE:** 908-225-4774

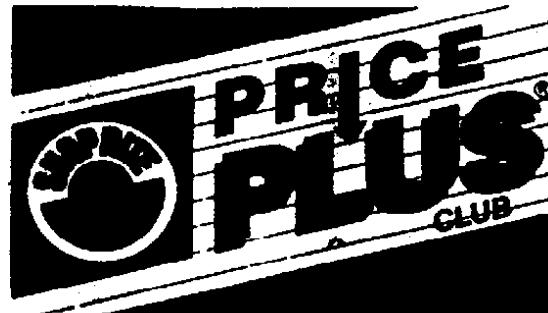
I agree to reimburse Wakefern Food Corporation/ShopRite the dollar value of all PRICE PLUS CLUB  
Shopper Discounts plus an additional \$.08 per item promotional charge. Form #43-678 (3) 6/91

Date: 1/11/91

Sales Rep Signature: J. M. Kuan

\* Payment to be received  
15 days from invoice date

## WAKEFERN / SHOPRITE PRICE PLUS CLUB PARTICIPATION FORM

BUYER'S NAME: JEFF REAGAN

DEPARTMENT NAME &amp; NUMBER:

GM # 09

VENDOR NAME: R. J. REYNOLDS

TOBACCO CO.

A/P VENDOR NUMBER: 075038

REPRESENTATIVE NAME:

G.N. KURUC, JR.

METHOD OF PAYMENT: (CHECK ONE)\*  
 INVOICE DEDUCTION  CHECKBILL TO: G.N. KURUC, JR.NAME: R. J. REYNOLDS TOBACCO CO.ADDRESS: 1000 NEW YORK AVENUECITY: NEW YORK, NJPHONE: 212-512-4774

ITEM CODE	UPC	PRODUCT DESCRIPTION/SIZE	DISCOUNT ORDERED	CYCLE DATES	4WK SALE RETAIL	GROSS PROFIT
8000012	12300-70913	WINSTON SELECT FULL FLAVOR KING	2.00	3/5-3/25		
8000020	12300-71013	WINSTON SELECT FULL FLAVOR BOX				
8000038	12300-20166	WINSTON SELECT LIGHT 100'S				
8000046	12300-20277	WINSTON SELECT LIGHT KING				
8000119	12300-71213	WINSTON LIGHT BOX KING				
8000151	12300-71113	WINSTON SELECT LIGHT KING				
8000422	12300-11013	WINSTON KING				
8000452	12300-11213	WINSTON BOX				
8000460	12300-11113	WINSTON LIGHT KING				
8000486	12300-11313	WINSTON LIGHT 100'S				
8000517	12300-11113	WINSTON 100'S				

I agree to reimburse Wakefern Food Corporation/ShopRite the dollar value of all PRICE PLUS CLUB Shopper Discounts plus an additional \$.08 per item promotional charge.

Date: 11/15/94Sales Rep Signature: G.N. KURUC

Form #43-678 (3) 6/91  
 \* Payment to be received  
 15 days from invoice date

## WAKEFERN / SHOPRITE PRICE PLUS CLUB PARTICIPATION FORM

BUYER'S NAME: JEFF REAGAN

DEPARTMENT NAME &amp; NUMBER:

GM # 09VENDOR NAME: R.J. REYNOLDS

TOBACCO CO.

A/P VENDOR NUMBER: 074088

REPRESENTATIVE NAME:

G.N. KURUC, JR.

METHOD OF PAYMENT: (CHECK ONE)\*

() INVOICE DEDUCTION () CHECKBILL TO: Jeff Reagan, Jr.NAME: Jeff Reagan TOBACCO COADDRESS: 406 PARK CENTER

EDISON, NJ 08817

PHONE: (201) 223-1774

ITEM CODE	UPC	PRODUCT DESCRIPTION/SIZE	DISCOUNT OFFERED	CYCLE DATES	4WK SALE RETAIL	GROSS PROFIT
8000525	12300-11913	WINSTON LIGHT BOX KING	2.00	3/5 - 3/25		
8000533	12300-11713	WINSTON ULTRA KING				
8000737	12300-15913	WINSTON LIGHT BOX 100'S				
8000174	12300-70313	WINSTON ULTRA BOX KING				
8001686	12300-70413	WINSTON ULTRA BOX 100'S				

I agree to reimburse Wakefern Food Corporation/ShopRite the dollar value of all PRICE PLUS CLUB Shopper Discounts plus an additional \$.08 per item promotional charge.

Date: 11/3/94Sales Rep Signature: J. N. KRN

Form #43-678 (3) 6/91

\* Payment to be received  
15 days from invoice date

## WAKEFERN / SHOPRITE PRICE PLUS CLUB PARTICIPATION FORM



BUYER'S NAME: \_\_\_\_\_

DEPARTMENT NAME &amp; NUMBER: \_\_\_\_\_

VENDOR NAME: R. J. Reynolds Tob.A/P VENDOR NUMBER: 075088

REPRESENTATIVE NAME: \_\_\_\_\_

G. N. Kuruc, Jr.

METHOD OF PAYMENT: (CHECK ONE)\*

() INVOICE DEDUCTION () CHECKBILL TO: R. J. Reynolds Tob. Co.NAME: G. N. Kuruc, Jr.ADDRESS: 400 Raritan Ctr. Pkwy.

Edison, NJ 08837

PHONE: (908) 225-4774

ITEM CODE	UPC	PRODUCT DESCRIPTION/SIZE	DISCOUNT OFFERED	CYCLE DATES	4WK SALE RETAIL	GROSS PROFIT
8010106	12300-25513	Doral Ultra King	\$2.00	3/26-4/22		
8010156	12300-15113	Doral Light King				
8010198	12300-16613	Doral Full Flavor King				
8010211	12300-15813	Doral Light Menthol 100's				
8010229	12300-15213	Doral Light 100's				
8010237	12300-16713	Doral Ultra 100's				
8010245	12300-15313	Doral Full Flavor 100's				
8011754	12300-15713	Doral Light Menthol King				
8010384	12300-84013	Doral Full Flavor Box				
8010392	12300-84113	Doral Light Box				

I agree to reimburse Wakefern Food Corporation/ShopRite the dollar value of all PRICE PLUS CLUB Shopper Discounts plus an additional \$.08 per item promotional charge.

Form #43-678 (3) 6/91

Date: 3/1/95Sales Rep Signature: G. N. Kuruc

\* Payment to be received  
15 days from invoice date

## WAKEFERN / SHOPRITE PRICE PLUS CLUB PARTICIPATION FORM



BUYER'S NAME: \_\_\_\_\_

METHOD OF PAYMENT: (CHECK ONE)\*  
( ) INVOICE DEDUCTION (X) CHECK

DEPARTMENT NAME &amp; NUMBER: \_\_\_\_\_

BILL TO: R. J. Reynolds Tob. Co.VENDOR NAME: R. J. Reynolds Tob. Co.NAME: G. N. Kuruc, Jr.A/P VENDOR NUMBER: 075088ADDRESS: 400 Raritan Ctr. Pkwy.

REPRESENTATIVE NAME:

EDISON, NJ 08837

G. N. Kuruc, Jr.PHONE: (908) 225-4774

ITEM CODE	UPC	PRODUCT DESCRIPTION/SIZE	DISCOUNT OFFERED	CYCLE DATES	4WK SALE RETAIL	GROSS PROFIT
8000151	12300-71113	Winston Select Light King	\$2.00	12/2-1/6		
8000119	12300-71213	Winston Select Light Box King				
8000200	12300-71013	Winston Select Full Flavor Box				
8000038	12300-20166	Winston Select Slim Light 100's				
8000046	12300-20277	Winston Select Light 100's				
8000012	12300-70913	Winston Select Full Flavor King				
8000428	12300-11013	Winston King				
8000452	12300-11213	Winston Box				
8000460	12300-11113	Winston Light King				
8000486	12300-11313	Winston Light 100's				
8000517	12300-11413	Winston 100's				

I agree to reimburse Wakefern Food Corporation/ShopRite the dollar value of all PRICE PLUS CLUB Shopper Discounts plus an additional \$.08 per item promotional charge.

Form #43-678 (3) 6/91

Date: 6/23/95Sales Rep Signature: G. N. Kuruc\* Payment to be received  
15 days from invoice date

## WAKEFERN / SHOPRITE PRICE PLUS CLUB PARTICIPATION FORM



BUYER'S NAME: \_\_\_\_\_

METHOD OF PAYMENT: (CHECK ONE)\*  
( ) INVOICE DEDUCTION (X) CHECK

DEPARTMENT NAME &amp; NUMBER: \_\_\_\_\_

BILL TO: R. J. Reynolds Tob. Co.VENDOR NAME: R. J. Reynolds Tob. Co.NAME: G. N. Kuruc, Jr.A/P VENDOR NUMBER: 075088ADDRESS: 400 Raritan Ctr. Pkwy.REPRESENTATIVE NAME:  
G. N. Kuruc, Jr.Edison, NJ 08837  
PHONE: (908) 225-4774

ITEM CODE	UPC	PRODUCT DESCRIPTION/SIZE	DISCOUNT OFFERED	CYCLE DATES	4WK SALE RETAIL	GROSS PROFIT
8000525	12300-11913	Winston Light Box 100's	\$2.00	12/3 - 1/6		
8000533	12300-11713	Winston Ultra King				
8000737	12300-15913	Winston Light Box 100's				
8001474	12300-70313	Winston Ultra Box King				
8001686	12300-70413	Winston Ultra Box 100's				
8000169	12300-22186	Winston Select Full Flavor Box 100's				

I agree to reimburse Wakefern Food Corporation/ShopRite the dollar value of all PRICE PLUS CLUB Shopper Discounts plus an additional \$.08 per item promotional charge.

Date: 1/23/95Sales Rep Signature: G. N. Kuruc\* Payment to be received  
15 days from invoice date

## WAKEFERN / SHOPRITE PRICE PLUS CLUB PARTICIPATION FORM

51849 8471



BUYER'S NAME: \_\_\_\_\_

METHOD OF PAYMENT: (CHECK ONE)\*  
( ) INVOICE DEDUCTION (xx) CHECK

DEPARTMENT NAME &amp; NUMBER: \_\_\_\_\_

BILL TO: R. J. Reynolds Tob. Co.

VENDOR NAME: R. J. Reynolds Tob. Co.NAME: G. N. Kuruc, Jr.A/P VENDOR NUMBER: 075088ADDRESS: 400 Raritan Ctr. Pkwy.REPRESENTATIVE NAME:  
G. N. Kuruc, Jr.Edison, NJ 08837  
PHONE: (908) 225-4774

ITEM CODE	UPC	PRODUCT DESCRIPTION/SIZE	DISCOUNT OFFERED	CYCLE DATES	4WK SALE RETAIL	GROSS PROFIT
8030017	12300-97513	WORTH Full Flavor King	\$2.00	12/10/95- 1/6/96		
8030106	12300-97713	WORTH Light King				
8030198	12300-97913	WORTH Light Menthol King				
8030097	12300-97813	WORTH Light 100's				
8031285	12300-97613	WORTH Full Flavor 100's				
8031275	12300-92813	WORTH Ultra 100's				
8031363	12300-98013	WORTH Light Menthol 100's				

I agree to reimburse Wakefern Food Corporation/ShopRite the dollar value of all PRICE PLUS CLUB Shopper Discounts plus an additional \$.08 per item promotional charge.

Form #43-678 (3) 6/91

Date: 10/10/95Sales Rep Signature: J. N. Kuruc\* Payment to be received  
15 days from invoice date